PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	William E. Sobel	Examiner:	Laurel L. Lashley
Application No.:	10/666,843	Art Unit:	2132
Filed:	September 19, 2003	Docket No.	SYMAP033
Title:	PREVENTING NETWORK DISCOVERY OF A SYSTEM SERVICES CONFIGURATION		

TRANSMITTAL OF AMENDMENT C

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment C in response to Office Action mailed June 20, 2007 in the above-identified application.

The fee has been calculated as shown below.

CLAIMS	After Amd.	HP*	Extra	Small Entity			Large Entity	
				Rate	Fee		Rate	Fee
Total	20	20	-0-	x $25 = $		OR	x $50 = $	
Independent	3	3	-0-	x $105 = $		OR	x $210 = $	
Multiple Dependent Claims				x $185 = $		OR	x $370 = $	
*HP = Highest previously paid				TOTAL FEE $		OR	TOTAL FEE $	-0-

☒ Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

	SMALL ENTITY			LARGE ENTITY	
	Rate	Add'l Fee		Rate	Add'l Fee
☐ Extension for Response within FIRST month	x $60 = $		OR	x $120 = $	
☒ Extension for Response within SECOND month	x $230 = $		OR	x $460 = $	460.00
☐ Extension for Response within THIRD month	x $525 = $		OR	x $1050 = $	
☐ Extension for Response within FOURTH month	x $820 = $		OR	x $1640 = $	
☐ Extension for Response within FIFTH month	x $1115 = $		OR	x $2230 = $	

Attorney Docket No. :SYMAP033
Application No.: 10/666,843

☐   Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685. (SYMAP033   ).

☒   Enclosed is our Check No. <u>3334</u> in the amount of $<u>460.00</u> to cover the additional claim fee and/or extension of time fees.

☐   Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.

☐   Enclosed are _____ sheets replacement drawings.

☐   Please charge Deposit Account No. 50-0685 (SYMAP033   ) in the amount of $_____ to cover the additional claim fee and/or extension of time fees.

☒   If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (SYMAP033   ).

☐   OTHER:

Respectfully submitted,
VAN PELT, YI & JAMES LLP

William J. James
Registration No. 40,661

10050 N. Foothill Blvd., Suite 200
Cupertino, CA 95014
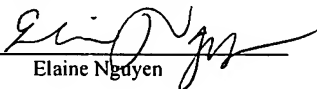Telephone: 408-973-2585

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AMENDMENT C

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the Office Action mailed June 20, 2007. The following amendments and remarks are respectfully submitted.